OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 1-82)

LOCAL REPORT NO: 15-7223 | OH-2 / OH-3 | Lebanon Police | 0830300 | ODHS USE ONLY - DO NOT MARK ABOVE | LOCAL FILE NO

REPORT TAKEN: AT STATION / [X] AT SCENE | NO OF VEH PEDESTRIANS INVOLVED: 2 | CRASH SEVERITY (CHECK MOST SEVERE): FATAL / INJURY / [X] PROPERTY DAMAGE ONLY | COMBINED VEH/PROP LOSS: [X] OVER $150 / UNDER $150 | HIT SKIP: SOLVED / UNSOLVED

IN COUNTY OF WARREN | IN [X] CITY | LEBANON | DATE OF CRASH: 5 / 4 / 15 | DAY: MONDAY | TIME, MILITARY: 1407

CRASH OCCURRED ON: KROGER, 1425 COLUMBUS AVE | WITHIN THE INTERSECTION OF: LEBANON

IF NOT IN INTERSECTION: ____ MILES ____ FEET N / W / E / S OF | (LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO) | CITY CODE

LOG-1 | LOG-2 | LOC | JUR | FH'S | FILT

DRIVER-PEDESTRIAN-VEHICLE SECTION

A

A | UNIT NO. | NO OF OCCUPANTS | [X] OPERATING / PARKED / DRIVERLESS / HIT & RUN / NON CONTACT | INSURANCE CO OR AGENT: WESTFIELD

DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI): HUDDLESON, JOHN | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 9300 HUDDLESON RD. WAYNESVILLE, OH

PHONE NO: 513-897-4181 | BIRTH DATE: m 8 D 11 y 41 | AGE: 73 | SEX: F | SOCIAL SECURITY NO | STATE: OH | DRIVER'S LICENSE NO: RM669343 | OCCUPATION

OWNER (IF SAME AS DRIVER, WRITE SAME): SUSAN HUDDLESON | ADDRESS: SAME | PHONE

VEH YR: 2000 | MAKE: FORD | MODEL: F150 | COLOR: WHT | STYLE: TK | STATE: OH | LICENSE PLATE NO: EMB3MY | TOWING SERVICE | VEH/PED DIR: FROM ____ TO ____

CIRCLE DAMAGE AREAS: 1 2 3 4 5 6 7 8 | 9 TOP, 10 UNDER CAR, 11 LOAD, 12 TRAILER

DAMAGE SEVERITY: NON-FUNCTIONAL / FUNCTIONAL / DISABLING

DAMAGE SCALE: [X] NONE / MODERATE / LIGHT / HEAVY

VEHICLE DISPOSITION: [X] DRIVEN AWAY / REMAINED AT SCENE / TOWED

FIRE: [X] NO FIRE / FIRE DUE TO CRASH / OTHER FIRE

8

8 | UNIT NO. 2 | NO OF OCCUPANTS | [X] OPERATING / PARKED / DRIVERLESS HIT& RUN / NON-CONTACT | INSURANCE CO. OR AGENT: STATE FARM

DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI): GINGRICH, BRENNA | ADDRESS (NO., STREET, CITY, STATE, ZIP CODE): 115 E. SILVER, LEBANON, OH

PHONE NO.: 330-509-3703 | BIRTHDATE: m 5 D 8 y 91 | AGE: 23 | SEX: F | SOCIAL SECURITY NO | STATE: OH | DRIVER'S LICENSE NO: T628617 | OCCUPATION

OWNER (IF SAME AS DRIVER, WRITE SAME): SAME | ADDRESS | PHONE

VEH YR: 12 | MAKE: VOLKS | MODEL: TIGUAN | COLOR: BLK | STYLE: SW | STATE: OH | LICENSE PLATE NO.: GFE9214 | TOWING SERVICE | VEH/PED DIR: FROM ____ TO ____

CIRCLE DAMAGE AREAS: 1 2 3 4 5 6 7 8 | 9 TOP, 10 UNDER CAR, 11 LOAD, 12 TRAILER

DAMAGE SEVERITY: [X] NON-FUNCTIONAL / FUNCTIONAL / DISABLING

DAMAGE SCALE: NONE / MODERATE / [X] LIGHT / HEAVY

VEHICLE DISPOSITION: [X] DRIVEN AWAY / REMAINED AT SCENE / TOWED

FIRE: [X] NO FIRE / FIRE DUE TO CRASH / OTHER FIRE

OCCUPANT SECTION

C

C | FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE | AGE | ADDRESS | PHONE | SEX

POSITION: A | B | C | D | E | F

INJURIES: A 5 | B 6 | C | D | E | F

D

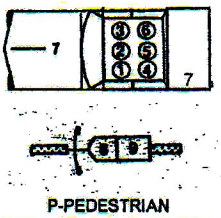
D | FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE | AGE | ADDRESS | PHONE | SEX

E

E | FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE | AGE | ADDRESS | PHONE | SEX

F

F | FROM UNIT NO. | NAME (LAST, FIRST, MI) | BIRTHDATE | AGE | ADDRESS | PHONE | SEX



P-PEDESTRIAN

1 FATAL
2 SERIOUS VISIBLE
3 MINOR VISIBLE
4 NO VISIBLE INJURY
5 NOT INJURED

CONDITION: A 1 | B 1

1 APPARENTLY NORMAL
2 SICK
3 FATIGUED
4 APPARENTLY ASLEEP
5 PHYSICAL DEFECT
8 OTHER CONDITION
7 UNKNOWN

POLICE ACTION

A | B | C | INJURED TAKEN TO | By

D | E | F | INJURED TAKEN TO | By

RESTRAINTS: A 8 | B 8 | C | D | E | F

1 NOT USED
2 NONE AVAILABLE
3 LAP BELT USED
4 LAP/SHOULDER BELT USED
5 SHOULDER BELT USED
6 CHILD SAFETY SEAT
7 AIR BAG USED
8 USE NOT REPORTED

ALCOHOL: A [ ] YES [X] NO TESTED | B [ ] YES [X] NO TESTED

1 NO ALCOHOL DETECTED
2 HBD ABILITY IMPAIRED
3- HBD ABILITY NOT IMPAIRED
4 HBD ABILITY UNKNOWN

A | ORC / CITY ORD | OFFENSE CHARGED AND DESCRIPTION

O | ORC. / CITY ORD. | OFFENSE CHARGED AND DESCRIPTION

EJECTION: A 1 | B 1 | C | D | E | F

1 NOT EJECTED
2 PARTIAL
3 TOTAL
4 TRAPPED INSIDE VEHICLE

DRUGS: A TESTED [ ] YES [X] NO | O TESTED [ ] YES [X] NO

1 NO DRUGS DETECTED
2 USING PRESCRIBED DRUG
3 USING ILLICIT DRUG

RECEIVED CALL	DISPATCHED	ARRIVED	CLEARED	OTHER TIME	TOTAL MINUTES
1407	1413	1421	1434		13

DATE REPORT FILED: m 5 D 11 y 15 | PHOTOS: [ ] YES [X] NO | OFFICER'S NAME: J. OEHLER | BADGE NO.: 124 | CHECKED BY

State Ptl-012 2/13/03